

PROTECTION OF MATERNITY AND INFANCY.

JANUARY 28, 1921.—Committed to the Committee of the Whole House on the state of the Union and ordered to be printed.

Mr. COOPER, from the Committee on Interstate and Foreign Commerce, submitted the following

REPORT.

[To accompany S. 3259.]

The Committee on Interstate and Foreign Commerce, to which was submitted the accompanying bill, report the same back to the House with certain amendments, with the recommendation that the amendments be agreed to and that the bill as thus amended be passed.

This bill (S. 3259) was introduced in the Senate by Senator Shepard. A bill identical in form was introduced in the House by Representative Towner. The bill was first reported and considered in the Senate and was passed, with amendments, by the Senate December 18, 1920. Your committee having both the Senate bill as amended and the House bill before them considered the Senate bill with its amendments in order to facilitate the passage of the proposed legislation.

In the main the amendments agreed to in the Senate have been approved by this committee, but some amendments to these amendments and some additional amendments are herewith reported and recommended for adoption.

Section 2 in the original bills provided for a maximum appropriation of \$4,000,000 to carry out the provisions of the bill. This was reduced by a Senate amendment to \$1,480,000, and this amendment has been approved by your committee.

Section 3 of the original bills was intended to be stricken out by the adoption of a substitute known as the Smoot amendment. This amendment was, however, mutilated in the printing, and the substance of the intended amendment is herewith reported as a substitute both for the original section and the Senate amendment.

SEC. 3. The Children's Bureau of the Department of Labor shall be charged with the carrying out of the provisions of this act, and the Chief of the Children's Bureau shall be the executive officer. The Chief of the Children's Bureau, as executive officer, is hereby authorized to form an advisory committee to consult with the Chief

of the Children's Bureau and to advise concerning any problems which may arise in connection with the carrying out of the provisions of this act, such advisory committee to consist of the Secretary of Agriculture, the Surgeon General of the United States Public Health Service, and the United States Commissioner of Education. The Children's Bureau shall have charge of all matters concerning the administration of this act, and shall have power to cooperate with the State agencies authorized to carry out the provisions of this act. It shall be the duty of the Children's Bureau to make or cause to be made such studies, investigations, and reports as will promote the efficient administration of this act.

Section 3 of the original bills created a Federal board, to which was committed the administration of the bill. The substitute strikes out the board and commits the administration directly to the Children's Bureau, thus avoiding the creation of a new board. As under the original provision, the Chief of the Children's Bureau was made the executive officer, and the board created would have been largely advisory in any event, it was thought best to make it so specifically. It is believed that the change will materially strengthen the bill.

These were the important Senate amendments. Some verbal amendments were adopted to bring other parts of the bill in harmony with these changes, and some further minor amendments were adopted by the Senate and approved by your committee. The committee also recommend for adoption some further amendments, as follows:

Page 5, line 11, strike out the word "above".

Page 5, line 15, after the word "employ," insert a comma and the following words: "to be taken from the eligible lists of the Civil Service Commission."

Page 5, line 17, after the word "elsewhere" strike out the following words: "at salaries or compensation to be approved by the Secretary of Labor and corresponding to those fixed by law for similar services elsewhere in Government employ."

Page 6, line 11, after the word "Bureau," insert the words "for its approval."

Page 6, line 19, after the word "purposes," strike out the comma and insert a period; strike out the word "due" and insert the word "Due."

Page 7, lines 1 and 2, strike out the following words: "the State university, land grant college, or other public" and insert the word "any."

Page 7, strike out all of section 10.

Page 7, renumber section 11 to read section 10.

Page 7, renumber section 12 to read section 11.

Page 8, renumber section 13 to read section 12.

Page 8, line 9, after the words "appeal to the" strike out the balance of the paragraph and insert in lieu thereof the following, "Secretary of Labor, and if the Secretary of Labor shall not direct such sum to be paid it shall be covered into the Treasury of the United States."

Page 8, renumber section 14 to read section 13.

Page 8, strike out after "Section 13" all of lines 13, 14, 15, 16, 17, and the word "State" in line 18.

Page 8, renumber section 15 to read section 14.

GENERAL CONSIDERATIONS.

The hearings before the Senate and House committees were largely attended, and were open to both the supporters and opponents of the legislation. Very little opposition was developed against the general purpose of the bill. Most of the opposition seemed to be directed against particular words and phrases of the original bills, and these objections have been largely obviated by the amendments reported. The representatives of various organizations who appeared gave information of the nation-wide interest and approval of the legislation. Thousands of petitions representing millions of people have been presented. National organizations, particularly of women, have officially indorsed the bill. Among these are the following:

General Federation of Women's Clubs.
 National Congress of Mothers and Parent Teacher Associations.
 Women's National Democratic Committee.
 Women's National Republican Committee.
 League of Women Voters.
 Association of Collegiate Alumnae.
 National Women's Christian Temperance Union.
 Council of Jewish Women.
 National Board of Young Women's Christian Association.
 Continental Congress of the Daughters American Revolution.
 National Association of Deans of Women.
 National Women's Association of Commerce.
 National Consumers' League.
 National Organization for Public Health Nursing.
 National Child Welfare Association.
 National Council of Women.
 Service Star Legion.
 American Child Hygiene Association.
 Woman's Foundation for Health.
 National Women's Trade Union League.
 Life Extension Institute of New York.
 Superintendents' department of the National Education Association.

It should be also stated that almost every important denomination in America has indorsed the bill. Last year the Methodist General Conference, representing over seven and a half million members, passed the strongest kind of resolutions indorsing the bill. Among other things they said: "We approve the purpose and the terms of the Sheppard-Towner bill, and we call upon Congress in the name of humanity and of American childhood and motherhood to pass this measure speedily."

Mr. W. F. Bigelow, editor of *Good Housekeeping*, wrote the governors of the States asking them if they approved the legislation and if they would agree to recommend to their legislatures cooperation under the provisions of the bill. Thirty-four replied favorably, some of them approving the legislation in the strongest terms. Gov. Lowden, of Illinois, wrote: "Most assuredly I want to be counted with those who favor the consideration of this question as a national question * * *. Mother and child are the key to our future as a nation * * *. The object of the Sheppard-Towner bill, namely, to treat maternity and infant welfare on a national basis, is correct in principle and I heartily indorse the idea." Gov. Smith,

of New York, wrote: "The State of New York will be among the first to give the Federal Government effective cooperation in carrying out the provisions of the Sheppard-Towner bill."

It is believed by your committee that this legislation by the National Government is necessary and of an emergency character. It is intended to stimulate and aid the States to provide means for saving the lives of thousands of mothers and infants who are annually dying in our country for want of care and attention. It was shown in the hearings that in a single year 23,000 mothers died in childbirth and nearly 250,000 infants died under 1 year of age, and that most of those deaths are preventable. Maternal mortality and infant mortality from maternal causes are not decreasing in the United States. During the past 20 years the typhoid rate has been reduced more than 50 per cent, the tuberculosis rate has been remarkably reduced, the diphtheria rate has been reduced more than one-half, smallpox has been nearly wiped out, but there has been no decrease in maternal deaths. One-half of infant deaths occur within six weeks of birth and are due chiefly to the condition of the mother and the lack of proper care and attention during and following confinement. Maternal deaths and infant deaths from maternal causes are not decreasing, principally because mothers do not have the necessary care, advice, and assistance they need.

Other countries show much lower death rates from these causes than our own country. It is stated that it is safer to be a mother in 17 important foreign countries than in the United States, and that babies have a better chance in 10 foreign countries than in our own.

In rural areas studied it was ascertained that 80 per cent of the mothers had received no advice or trained care preceding the birth of their children. Many mothers had no trained attendance of any kind at confinement. Miss Fox, of the American Red Cross, who directs the Public Health Nursing Service, says: "I am speaking from the knowledge gained from my conversations and from letters and reports to me from our field directors, from the 1,200 and more Red Cross Public Health nurses now doing work throughout the United States, largely in the small towns and in the rural districts in every single State of the United States, in the remote and isolated areas as well as in the more densely populated areas, and the areas which have the advantages which come from larger population. I would like to say that if those nurses were here in this room we would speak in a unanimous chorus voicing our conviction that the needs of the mothers and children of this country must be given attention and must be given such attention as is outlined in this bill."

Probably the most discouraging feature of the situation lies in the fact that owing to its peculiar features no progress is being made. It is a startling and a disgraceful fact that in this enlightened age and in this prosperous country more women between the ages of 15 and 45 lose their lives from conditions connected with childbirth than from any other cause except tuberculosis. If this year it should occur that by some pestilence such as smallpox 25,000 persons should die, there would be no holding back on the part of the Government to do everything to avert the disaster. Yet it is practically certain 25,000 mothers will lose their lives from causes arising out of motherhood, and although we know that at least one-half of these could be saved by advice, care, and timely help. The actuary of one of the largest life insurance companies from his investigations reports that deaths

from maternal causes actually increased in the United States for the year 1920 over the year 1919 15 per cent. It must be apparent that some action is necessary to remedy these shocking conditions.

A recent special dispatch to a New York newspaper states that all northern Maine is stirred by the refusal of the physicians of a county to respond to calls from the country in cases of childbirth. In consequence babies are being born without the presence of a physician or nurse, neighbors and relatives meeting the situation as best they can. The physicians, it is explained, have requested the women be brought to the hospitals. It is stated that this is literally impossible in a large number of cases. Conditions in the outlying sections are described as worse than those in the new frontier communities of the West 50 to 75 years ago. At least one infant is said to have died at birth as a result of want of expert care.

If this be true, it shows that there is great need, even in the older States, for special effort to remedy such distressing conditions.

If existing conditions are such as to warrant action on the part of the Government to encourage and aid the States in the protection of maternity and infancy, the results which have attended active and intensive work in small areas may be considered.

Work in New York City has been carried on quite intensively in one district by nurses' associations, supported by private contributions. In one year 4,683 cases were cared for. Not one mother died. One infant under one month of age died for every 102 born. These were not selected cases, but the usual tenement calls that come to the visiting nurse service of every large city. The city death rate per 1,000 cases of all infants under one month was 37. It will thus be seen that the death rate of these infants was reduced from 37 to 10 per 1,000.

Miss Baker, director of child hygiene, New York, says they have proved over and over again that with instruction and help the death rate of women who die from maternal causes can be reduced one-half or two-thirds. They have by their work in many cases reduced the infant death rate from 40 to 18 or 19 per 1,000. As a result of this work, which covers only a part of the city, the infant mortality rate for the whole city has been reduced almost one-half.

An insurance statistician reports that when attention and care in prenatal and maternity cases are given under skilled direction only two women instead of five die out of 1,000. Only 10 infants instead of 40 die under one month of age per 1,000. And he adds, "Such results can be obtained anywhere if adequate nursing and medical care are available. Such is the great promise in life conservation held out by prenatal and maternity care for women."

Enough has been shown to prove beyond question that we can, by merely enlarging the activities of the States, bring to bear upon these terrible conditions such service as will annually save the lives of thousands of mothers and tens of thousands of their children. As to whether this work will be welcomed by the mothers themselves, we may consider the testimony of Miss Fox, of the Red Cross. She says:

Whenever there is a public-health nurse provided, and her presence in the town or country becomes known, she is immediately surrounded by the women of that territory, begging and imploring her to come to their homes and help them with their problems. The nurses will tell you they are distressed beyond measure because there are so few of them and they have such large territories to cover that they can not possibly at present respond to all the demands upon them.

Miss Julia Lathrop, Chief of the Children's Bureau, in her statement before the committee, said:

The bill is designed to avoid an obnoxious governmental authority. It respects the rights and duties of the States and requires no rigid control of their appropriations. But experience shows that there should be a central source affording to the different States, when they make their plans, the best experience of all of the other States and of the world, and a central body competent to assure taxpayers and the special beneficiaries of the measure that its spirit is effectively carried out and that intelligent use is made of every dollar.

The actual public health nursing anticipated under the bill would be done by local employees, not by the Federal Government. The percentage of the appropriation that may be spent for administrative purposes by the Federal Government can not exceed 5 per cent, and at least 95 per cent must be allotted to the States.

The bill does not contemplate the creation of new machinery in the States. It is its purpose to have the work done in the States by State child-hygiene or child-welfare divisions, and 35 of the 48 States already have such divisions, most of them under the State boards of health.

